

Scoil an Chroí Ró Naofa Íosa

(Sacred Heart of Jesus National School)
Huntstown, Mulhuddart, Dublin 15, D15 KF65.

ROLL NO.: <u>19755L</u> PHONE: <u>01 8216400</u>

ENROLMENT APPLICATION EMAIL: <u>enrol.sacredheartns@gmail.com</u> OFFICE EMAIL: <u>sacredheartns@gmail.com</u>

WEBSITE: www.shns.ie

MAINSTREAM CLASSES ADMISSION APPLICATION FORM

Child's name:				
Address:				
Eircode:				
	PPS number: Gender:			
Name(s) of sibling(s) in this scho	ool, if any:			
Nationality:	Nationality of parent(s):	Religion:		
First language:	Other	Other languages:		
2024 class being applied for (ple	ase tick):			
Junior Infants 3rd Class	Senior Infants 4 th Class	1st Class 5th Class	2 nd Class 6 th Class	
Parent 1 / Guardian 1:				
Address (if different from above):				
Mobile no Home tel. no Work tel. no				
Email address:				
Parent 2 / Guardian 2: Name:				
Address (if different from above):				
Mobile no	Home tel. no.	Work tel. no.		
Email address:				
Name of emergency contact person 1:		Tel. no	Tel. no	
Name of emergency contact person 2: Tel. no				
confirm that I have the permission	the emergency contact(s) listed about of the emergency contact(s) listed I give permission to the emergency must be contacted. YES	above to have their deta	ils recorded in the school	
Is your child currently enrolled in or attending any other school or pre-school?				
YES NO				
If yes, please give name of school/pre-school:				
Address of school:				
Date of enrolment:	Current class:			

Does your child have any medical conditions that the school should be aware of e.g. allergies, asthma, diabetes, sight/hearing/speech/mobility difficulties etc.? If yes, please give details:				
		Yes No		
Have you given us any reports/letters from support professiona	als?			
Do you give permission for your child to take part in school tri	ps?			
Do you give permission for your child to be brought to hospital	in case of emergency?			
Have you provided the school with an original birth certificate	?			
Have you provided the school with an original baptismal cert (where applicable)?			
Please Note:				
Application for admission does not guarantee a place in the school. Parelevant information, and inform the school of any change of address, of the withholding of relevant information will invalidate an admission parent/guardian, which will be processed by the Board of Management Admission Policy.	ontact details etc. False or m 1 application, and necessita	isleading declarations and/or te a new application by the		
The school is obliged to share Personal Pupil Data with other agencies HSE, Tusla etc. where there is a legal basis for doing so under GDPR school website www.shns.ie.	such as the Department of Ed legislation. The school's GD	ducation (DE), other schools, PR policy is available on the		
Declaration and Consent – Ple	ase Tick and Sign			
I/We wish to make an admission application for my/our child to Scoil School). I/We confirm that I/we have read and accept the school www.shns.ie or in hard copy from the school office).	an Chroí Ró Naofa Íosa (Sa l's Admission Policy (avail	cred Heart of Jesus National able on the school website		
I/We confirm that the information recorded on this Admission Applic	ation Form is accurate and	true.		
I/We consent for applicable pupil information to be stored on the Pr Management and Student Information System.	imary Online Database (PO	DD) and the school's Aladdin		
I/We consent for applicable pupil information to be shared with other GDPR legislation.	agencies where there is a lo	egal basis for doing so under		
I/We consent to receiving school and community communications from	n the school via post, phone	and electronic channels.		
Signed Parent 1 / Guardian 1:	Date:			
Signed Parent 2 / Guardian 2:	Date:			
For Office U				
Date Application Received:	Class Applied for: _			
Notes:				